ı	Please type a plus	sign (+) inside this box	J		10/15/01		A
7 * 1	PATENT APPLICATION FI		Attorney Docket No.		CRD0959		
			First Inventor		Jon Buzzard, et al.		£
0/12			Title	Title		Handle Deployment Mechanism For Medical Device And Method	
	(only for new nonprovisional applications under 37 CFR Express Mail		Express Mail La	abel No.   EK256795188US		· 25	
		ON ELEMENTS		ADD	RESS TO:	Commissioner for Patents	CO 1
<i>j</i> == 9		concerning utility patent app	olication			Box Patent Application Washington, DC 20231	'' T
	contents.  1.			Washington, DC 20231  7. □ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. □ Computer Readable Form (CRF)  b. □ Specification Sequence Listing on:  i. □ CD-ROM or CD-R (2 copies); or  ii. □ paper  c. □ Statement verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. □ Assignment Papers (cover sheet & document(s))  10. □ 37 CFR 3.73(b) Statement □ Power of Attorney (when there is an assignee)  11. □ English Translation Document (if applicable)  12. □ Information Disclosure Statement (IDS)/PTO-1449 □ Copies of IDS Citations  13. □ Preliminary Amendment  14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. □ Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. □ Request and Certifications under 35 U.S.C. 122			TS si) ttorney se) citations
	6. Application Data Sheet. See 37 CFR 1.76						
	18.						
	20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to at:						
	Telephone: (30	Telephone: (305) 824-2922 Fax: (305) 824-2747  21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
	NAME	Michael W. Montgo	omery	/		Reg. No. 35,958	
	SIGNATURE M/What Monty						
	DATE	Oxfober 12, 2001	-/-/		-/-		

# FEE TRANSMITTAL

Cq	te if Known
Application Number	nknown
Filing Date	October 12, 2001
First Named Inventor	Jon Buzzard, et al.
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	CRD0959

#### **FEE CALCULATION**

#### CLAIMS AS FILED

(1)	(2)		(3)	(4)	(5)
FOR:	NUMBER	FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	8 - 20 =		0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	2 - 3 =		0	x 84.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS			N/A	\$280.00	
				TOTAL FEES	\$ 740.00

#### METHOD OF PAYMENT

- ∑ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CRD0959/MWM. Three copies of this sheet are enclosed.

Typed or Printed Name Michael W. Mentgomery Reg. No. 35,958  Signature Date: October 12, 2001  No. 10-0750	SUBMITTED BY:	Complete (if applicable)
Signature States A John Komers Date: October 12, 2001 No. 10-0750		Reg. No. 35,958
	Signature Sulutar Mar Tomery Date: October 12, 200	•

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Jon Buzzard

Frederick Feller III

Filed:

October 12, 2001

For:

Handle Deployment Mechanism For Medical Device And Method

## Express Mail Certificate

"Express Mail" mailing number: EK256795188US

Date of Deposit: October 12, 2001

I hereby certify that this complete application, including specification pages, claims, drawings and unsigned declaration and power of attorney are being deposited with the United Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Michael W. Montgomery